Improvement Intervention Request			
Name of the Process/Problem that needs to be improved (circle one):			
Requester Name/Title/Phone:			
Description			
Description of Improvement Requested or Problem/Barrier Area to be solved/ameliorated:			
Starting Point of Process/Problem:		Ending Point of Process/Problem:	
Criticality/Urgency:			
Anticipated Results – What is to be gained?			
Program Area(s) Involved/Affected:			
Number and Nature of Staff Affected:			
Any Related Impending Application/Procedure/Policy/Other Changes (as known):			
Sponsorship (if known)			
Sponsor Name:			Phone:
Title:		Program/Location:	
Manager Name/Title/Phone:			
Sponsor Comments/Recommendations:			
Sponsor Approval/Agreement (Signature):			Date:
Below for Continuous Process Improvement Use Only			
OLM Coordinator:			Date Received:
Steering Committee Recommendation/Decision (as appropriate):			
CI Practitioner Lead:	Co-CI Practitioner:		Est. Start Date:
CI Practitioner Observers:			
Comments:			

Improvement Intervention Request Protocol

- > Improvement Interventions can be requested by <u>any</u> departmental staff and submitted to the Office of Lean Management.
- If the Requester is someone other than the potential Sponsor, the Office of Lean Management (OLM) will confirm the Sponsorship, and the request will be forwarded to the Sponsor for input.
- > The Continuous Improvement (CI) Practitioner(s) for the intervention will be identified and confirmed by OLM.
- The Sponsor will meet with the designated CI Practitioners to identify the needs and appropriate intervention and to develop the contract and Charter for the VSM, Kaizen, or other type of intervention.
- As appropriate, the Steering Group will review the Charter and provide its recommendations and decision re: the implementation and prioritization of the intervention.
- > The Sponsor will commit to actively supporting and assuring a) the staff time and resources required to conduct the intervention and related processes and b) the resources and processes required to implement the results of the intervention.

Send Requests for Improvement Interventions to:

Walter E. Lowell, Director
Office of Lean Management, DHHS
47 Independence Drive, #11 SHS
Greenlaw Building, Ground Floor, Rm. 6
Augusta, ME 04333-0011

Phone: 287-4307

Improvement Intervention Request - Definitions

Name of the Process/Problem that needs to be improved: A <u>brief</u> name for the process or problem to be improved. For example: Intake-AMHS Application/Request; Reportable Events-MR Critical Incidents, OIAS Eligibility Review.

Requester Name/Title/Phone: The name, title, and contact information for the person initiating the request.

Description of Process Improvement Requested or Problem/Barrier Area to be solved/ameliorated: This is intended for a fuller description of 1) a work/business process that should be improved; 2) a specific, focused individual problem/problem area/barrier that can be solved or ameliorated in a short, concentrated effort and/or time. The description should indicate whether this is a process, problem/barrier, or other need and should be sufficient for the DHHS Office of Lean Management to begin to understand what is being suggested for improvement.

Process/Problem Boundaries/Bookends

Beginning/Starting Point of Process: The point that defines or marks the beginning of the process. For example, in the Intake example above: the first point of contact indicating a request/need for services. That is, an individual or organization first calls, sends a letter, fax, or e-mail, phones, or has direct contact (homelessness outreach).

Ending Point of Process: The last point/activity in the process or problem area. For example, the application process above might be complete when all the required information is provided, or it could be when the applicant is notified of the decision.

Criticality/Urgency: A brief description of the urgency for the process or problem to be addressed. For example, in the Intake application process above, it might be noted that the current process is highly variable among not only departmental offices and programs but also among the many contracted provider agencies (as would be noted in the description above) and that the AMHI Consent Decree mandates the timely provision of services to adults with serious mental illness with the report due imminently.

Anticipated Results – What is to be gained? Briefly, what are the benefits or gains you see resulting from an improved process or resolved problem? These can be qualitative and/or quantitative.

Program Area(s) Involved/Affected: Brief description of the program/business and/or organizational areas that are affected or somehow related to the process and or problem that needs improvement.

Number and Nature of Staff Affected: Brief statement of the numbers <u>and</u> nature of staff affected/involved in the process or problem area.

Any Related Impending Application/Procedure/Policy/Other Changes (as known): For example, is a rule going to change shortly which will have an impact on the process or problem? Is funding going to increase or decrease?

Sponsorship (if known): If you know who it might be, provide contact information for the Sponsor(s) and Manager(s) of the process/problem to be improved. To <u>suggest</u> a process/problem for an intervention, you do not need their signatures/approvals.

Send Request/Suggestion for Improvement Intervention to:

Walter E. Lowell, Director Office of Lean Management 47 Independence Drive, #11 SHS Greenlaw Building, Ground Floor, Rm. 6 Augusta, ME 04333-0011